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Bib Data Sheet

CONFIRMATION NO. 1433

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|-----------------------------|---------------------------------------|--------------|------------------------|-----------------------------|
| SERIAL NUMBER 10/693,822 | FILING DATE 10/23/2003 RULE | CLASS 345 | GROUP ART UNIT 2671 | ATTORNEY DOCKET NO. 4090 |
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APPLICANTS

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** CONTINUING DATA *****

This application is a CIP of 10/184,795 06/27/2002 *D.K.*
 which claims benefit of 60/330,244 10/18/2001 *D.K.*

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/23/2004

| Foreign Priority claimed | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY WA | SHEETS DRAWING 28 | TOTAL CLAIMS 36 | INDEPENDENT CLAIMS 4 |
|---------------------------------|--|---------------------------|-------------------------|-----------------------|----------------------------|
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Initials | | | | |

ADDRESS

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 704-228th Avenue NE
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 98074

TITLE

Multiple-level graphics processing with animation interval generation

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|--|--|-----------------------------------|---|--|--|--------------------------------|---------------------------------|
| FILING FEE RECEIVED 1274 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: <table border="1" style="margin-left: 20px;"> <tr><td><input type="checkbox"/> All Fees</td></tr> <tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr> <tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr> <tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr> <tr><td><input type="checkbox"/> Other</td></tr> <tr><td><input type="checkbox"/> Credit</td></tr> </table> | <input type="checkbox"/> All Fees | <input type="checkbox"/> 1.16 Fees (Filing) | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) | <input type="checkbox"/> 1.18 Fees (Issue) | <input type="checkbox"/> Other | <input type="checkbox"/> Credit |
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